

REHABILITATION SERVICES

Activity Services

RH.1

Inpatient, residential, and partial-hospital organizations provide, or make arrangements for providing, activity services to meet the physical, social, cultural, recreational, health maintenance, and rehabilitation needs of individuals served. Activity services involve the principles and practice of art therapy, dance/movement therapy, music therapy, occupational therapy, recreational therapy, and other related activities by credentialed, licensed, or certified professionals.

RH.2

Inpatient, residential, and partial-hospital organizations have a written plan that describes the organization of their activity service or the arrangements made for providing activity services.

RH.2.1 The activity service has a well-organized plan for using community resources.

RH.3

The goals and objectives of the organization's activity service are stated in writing.

RH.4

Inpatient, residential, and partial-hospitalization organizations have written policies and procedures that govern their activity services.

RH.4.1 The policies and procedures are made known and are available to activity service and other appropriate personnel.

RH.4.2 The policies and procedures are reviewed and revised as necessary.

RH.5

Appropriate activities are provided to all individuals served during days, evenings, and weekends.

RH.5.1 The daily activities program is planned to provide a consistent and well-structured yet flexible framework for daily living.

RH.5.2 Whenever possible, individuals served participate in planning activity services.

RH.5.3 Activity schedules are posted in places accessible to individuals served and staff.

RH.5.4 The activities program is reviewed and revised according to individuals changing needs.

RH.6

When provided, activity services are incorporated in the treatment plan of the individual served.

RH.6.1 When provided, therapeutic activity services included in the treatment plan reflect an assessment of the individual's needs, interests, life experiences, capacities, and deficiencies.

RH.6.2 Activity service staff collaborate with other professional staff in delineating goals for the treatment, health maintenance, and vocational adjustment of individuals served.

RH.6.3 Each individual's clinical record contains progress notes that describe his/her response to activity services, as well as other pertinent observations.

RH.7

Documentation demonstrates that individuals served are given leisure time and are encouraged to use that leisure time in a way that fulfills their cultural and recreational interests and feelings of human dignity.

RH.8

The activity service is supervised by a qualified individual.

RH.9

Activity service staff are sufficient in number and skills to meet the needs of individuals served and achieve the goals of the service.

RH.10

The activity service maintains ongoing staff development programs.

RH.11

Activity service staff participate in appropriate clinical and administrative committees and conferences.

RH.12

Activity service staff receive training and demonstrate competence in handling medical and psychiatric emergencies.

RH.13

Appropriate space, equipment, and organizations are provided to meet the needs of individuals served for activity services.

- RH.13.1 Organizations and equipment designated for activity services are constructed or modified to provide, insofar as possible, pleasant and functional areas accessible to all individuals served regardless of their disabilities.
- RH.13.2 Office, storage, and supply space is adequate and accessible.
- RH.13.3 When indicated, equipment and supplies that enable an activity to be brought to the individual served are used.
- RH.13.4 Vehicles used for transportation are not labeled in a manner that calls unnecessary attention to individuals served.
- RH.13.5 Space, equipment, and organizations used both inside and outside the organization meet federal, state, and local requirements for safety, fire, prevention, health, and sanitation.

Education Services

RH.14

Inpatient and residential organizations provide, or make arrangements for providing, education services to meet the needs of all individuals.

- RH.14.1 Education services provide special education experiences for individuals whose emotional disturbances make it difficult for them to learn.
- RH.14.2 Education services are designed to maintain the educational and intellectual development of all individuals served.
- RH.14.3 Educational services provide opportunities to remedy deficiencies in the education of individuals served who have fallen behind because of their disorder.

RH.15

When indicated, individuals participate in community education programs.

RH.16

Clinicians confer periodically with teachers or principals on the progress of each individual served.

RH.17

Individuals are encouraged to take part in extracurricular school activities, when appropriate.

RH.18

Documentation exists in each clinical record of periodic evaluations of educational achievement in relation to developmental level, chronological age, sex, special handicaps, medications, and psychotherapeutic needs.

RH.19

Organizations that operate their own education service have adequate staff and space to meet the educational needs of individuals served.

RH.19.1 The organization provides an education director and staff who meet state and/or local certification requirements for education and/or special education.

RH.19.2 An appropriate ration of teachers to students is provided so teachers can give special attention to students or to groups of students who are at different stages of treatment and education.

RH.19.3 The education service has space and materials commensurate with the scope of its activities, including an adequate number of classrooms.

Speech, Language, and Hearing Services

RH.20

Speech, language, and hearing services are available, either within the organization or by written arrangement with another organization or a qualified clinician, to provide assessments of speech, language, or hearing when indicated and to provide counseling, treatment, and rehabilitation when needed.

RH.21

Inpatient and residential organizations conduct an audiometric screening of new individuals served who have not been screened previously.

RH.22

Organizations that have a speech, language, and hearing service have written policies and procedures to govern its operation.

RH.22.1 The speech, language, and hearing service provides the following services:

RH.22.1.1 speech and language screening of individuals served when deemed necessary by members of the treatment team, the family, or significant others.

RH.22.1.2 comprehensive speech and language evaluation of individuals served when indicated by screening results;

RH.22.1.3 comprehensive audiological assessment of individuals served when indicated;

RH.22.1.4 procurement, maintenance, or replacement of hearing aids when specified by a qualified audiologist; and

RH.22.1.5 rehabilitation programs, when appropriate, to establish the speech skills necessary for comprehension and expression.

RH.22.2 Assessment and treatment results are reported accurately and systematically and in a manner that accomplished the following:

RH.22.2.1 defines the problem;

RH.22.2.2 provides a basis for formulating a plan that contains treatment objectives and procedures;

RH.22.2.3 provides information to staff working with individuals served; and

RH.22.2.4 provides evaluations and summary reports for inclusion in the clinical record.

RH.23

The speech, language, and hearing service is administered and supervised by qualified speech-language and hearing clinicians.

RH.23.1 All staff with independent responsibilities have a Certificate of Clinical Competence or Statement of Equivalence in either speech pathology or audiology from the American Speech-Language- Hearing Association and meet the current legal requirements of licensure or registration, or staff have documented equivalent training and/or experience and meet current legal requirements of licensure or registration.

RH.22.2 Support personnel, such as speech pathology assistants and communication aides, are qualified by training and/or experience for the level of work they perform and are appropriately supervised by a staff speech-language pathologist or audiologist.

RH.24

Equipment meets the current standards of the American Board of Examiners in Speech Pathology and Audiology of the American Speech-Language-Hearing Association, including standards concerning the location, calibration, and maintenance of equipment, or equipment meets equivalent standards.

Vocational Rehabilitation Services

RH.25

Individuals served receive counseling on their specific vocational needs, such as their vocational strengths and weaknesses, the demands of their current and future jobs, the responsibilities of holding a job, and the problems related to vocational training, placement and employment.

RH.26

An organization may delegate vocational rehabilitation responsibilities to an outside agency. However, the agency assigns an individual approved by the organization to serve as its coordinator of vocational rehabilitation and agrees to comply with the standards in the “Vocational Rehabilitation Services” section of this chapter.

RH.27

Organizations that have a vocational rehabilitation service have written policies and procedures to govern its operation.

RH.27.1 The vocational rehabilitation service assesses the individuals vocational needs with regard to the following:

RH.27.1.1 current work skills and potential for improving skills or developing new ones:

RH.27.1.2 educational background;

RH.27.1.3 amenability to vocational counseling;

RH.27.1.4 aptitudes, interests, and motivations for getting involved in various job-related activities;

RH.27.1.5 physical abilities;

RH.27.1.6 skills and experiences in seeking jobs;

RH.27.1.7 work habits related to tardiness, absenteeism, dependability, honesty, and relations with co-workers and supervisors;

RH.27.1.8 personal grooming and appearance; and

RH.27.1.9 expectations regarding the personal, financial, and social benefits to be derived from working.

RH.27.2 Vocational services are provided according to an individualized treatment plan.

RH.27.2.1 The criteria for determining an individual's job readiness are stated in his/her treatment plan.

RH.27.3 A record is kept of vocational rehabilitation activities, including activity dates and descriptions, a list of participants and the results of the activities.

RH.27.4 All work programs conform to applicable law and regulation.

RH.28

The organization's vocational rehabilitation service has a sufficient number of appropriately qualified staff and support personnel.

RH.28.1 A person or team is assigned responsibility to implement vocational rehabilitation services.

RH.28.2 The organization has available at least one qualified vocational rehabilitation counselor or occupational therapist responsible for the professional standards, coordination, and delivery of services.

RH.28.3 All personnel providing vocational rehabilitation services have training, experience, and competence consistent with acceptable standards of their specialty field.

RH.28.4 A sufficient number of qualified vocational rehabilitation counselors and support personnel are available to meet the needs of individuals served.